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CONFIRMATION NO. 7482

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|---|---|-------------------------------|---|---------------------------------------|--------------------------------|
| SERIAL NUMBER 10/717,399 | FILING OR 371(c) DATE 11/19/2003 RULE | CLASS 606 | GROUP ART UNIT 3733 | ATTORNEY DOCKET NO. ACM 371 | |
| APPLICANTS Randall J. Huebner, Beaverton, OR; | | | | | |
| ** CONTINUING DATA ***** OK. AX 12/26/06 This appln claims benefit of 60/427,908 11/19/2002 and claims benefit of 60/512,136 10/17/2003 | | | | | |
| ** FOREIGN APPLICATIONS ***** None. AX 12/26/06 | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/18/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Amirabbe Lamara AR</i> Examiner's Signature Initials | | STATE OR COUNTRY OR | SHEETS DRAWING 6 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
| ADDRESS 23581 | | | | | |
| TITLE Bone plates with reference marks | | | | | |
| FILING FEE RECEIVED 770 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |